ICNP to SNOMED CT (Interventions) Equivalency table Release Notes - July 2017

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The equivalency table is also available for download from the ICN website: FOR DISCUSSION WITH ICN AS THEY WILL NEED TO MANAGE THE LICENSING IF THEY DO THIS

Users of the ICNP 2019 SNOMED CT equivalency table must comply with the licensing agreements of both ICN and SNOMED International.

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1 Introduction

The International Classification of Nursing Practice (ICNP) to SNOMED CT International Release Nursing Interventions equivalency table is a product of an ongoing programme of work carried out under a pre-existing collaboration agreement between the International Council of Nurses (ICN) and the International Health Terminology Standards Organisation (IHTSDO). The work commenced in 2015 and the first joint release of the equivalency table took place in April 2016.

2 Background

The overarching aim of the collaboration agreement, first established in 2010 and updated in September 2014, was to advance terminology harmonisation and foster interoperability in health information systems. Joint work would build on previous efforts, culminating in joint publication of:

a) An equivalence table between the International Classification for Nursing Practice (ICNP®) and SNOMED Clinical Terms (SNOMED CT®) for nursing diagnoses

b) An equivalence table between ICNP and SNOMED CT for nursing interventions.

The initial effort centred on nursing diagnoses, specifically problems. The focus of this release document is on the identification of SNOMED CT equivalencies for ICNP nursing interventions.

3 Motivation

ICNP, a product of the ICN, is a terminology that enables nurses to describe and report their practice in a systematic way. The resulting information is used to support care and effective decision-making, and to inform nursing education and health policy.

SNOMED CT is the most comprehensive and precise clinical health terminology product in the world, owned and distributed around the world by The International Health Terminology Standards Development Organisation (IHTSDO).
The equivalency table is intended for use by nurses, and other interested professional groups. Robust systems and processes within ICN and IHTSDO assure the integrity of both terminologies.

As ICNP is intended for use by and for nurses, ICN has been able to focus attention on the development of ICNP specifically for nursing practice. This has resulted in a rich and comprehensive resource that nurses can use to describe and report in detail the things that they assess (diagnoses e.g. nausea) and the things that they do (interventions e.g. counseling). The potential benefits of a consistent approach to capturing nursing data are far-reaching. However, nurses do not practice in isolation; they practice alongside many other disciplines. One of the potential risks of a specific nursing-focus is that nursing will be somehow disconnected from a larger health information landscape.

The table of equivalence provides a vehicle for transforming ICNP-encoded data into SNOMED CT (e.g. an ICNP concept in a local system can be transformed via the table to the equivalent SNOMED CT concept for use in a multidisciplinary record). By providing a robust pathway from ICNP to SNOMED CT, the table of equivalence helps to ensure that users of ICNP can continue to use their preferred terminology while remaining a central part of the bigger picture and wider implementation of SNOMED CT globally.

4 Design

Decisions concerning source concepts, target concepts and validity of equivalencies were made by consensus of all parties (ICN, IHTSDO and the IHTSDO Nursing Special Interest Group (SIG)). In addition, the Nursing SIG has provided international validation of the content included in the equivalence table prior to publication.

4.1 Versions

The version of ICNP used is the May 2017 release.
The version of SNOMED CT used is the July 2017 International Release.

4.2 Source

The source is a subset of 1063 ICNP interventional concepts.

4.3 Target

All target concepts are drawn from SNOMED CT Procedures.

4.4 Direction

The direction is from the ICNP classification to SNOMED CT International Release procedures.

4.5 Cardinality

The cardinality for all equivalents in the table is one-to-one.

5 Content

The ICNP to SNOMED CT nursing interventions equivalency table covers just one semantic type – nursing interventions – with equivalent ICNP and SNOMED CT concepts for each intervention. The table comprises 993 equivalents, representing a subset of ICNP and a subset of SNOMED CT – equivalents have not been identified for all ICNP interventions, or for all SNOMED CT Procedures.

5.1 Changes for the July 2017 release

- One concept was removed from the INCP maptarget due to duplication in the table:

Removed	Duplicate	Removed	
10039330	Fluid Therapy	713075008	Management of fluid therapy (procedure)

- One concept was changed as it was found to be a duplicate in SCT:

		Replacement SCT	Replacement	Inactive DUPLICATE in SCT
10024222	Assessing Caregiver Stress	733861006	Assessment of caregiver stress (situation)	710842000 |Assessment of caregiver stress (procedure)|

As a result of changes made to the May 2017 release of ICNP, there were 41 new ICNP codes for interventions which were added to the table.

Of the 41, 23 needed new SCT concepts as no match was found in the January release. So these 23 new codes were added to SNOMED CT for the July 2017 release.

The following members have been added to the equivalency table:

ICNP maptarget	SCT Active ID
ICNP Code	SCT Code
10046816	733853001
10046828	733854007
10046871	733863009
10046885	733866001
10046960	733810001
10046994	733833000
10046902	733867005
10046939	733901008
10050384	733849003
10050313	733908002
10050117	733869008
10050129	733870009

10050155	440363007
10050281	733920005
10050332	733923007
10050345	733924001
10050350	733925000
10050210	733864003
10050223	733919004
10050234	733871008
10046918	733856009
10050321	733915005
10050193	733873006
10050366	733916006
10050138	268360001
10050164	167217005
10050206	269911007
10046788	103699006
10050101	385816003
10050247	103735009
10050140	427247008
10050172	167592004
10050252	85614001
10050309	225981007
10050268	313332003
10050091	225388007
10050299	386226007
10046790	225385005
10050275	704444008
10046800	370813004
10050186	444714004
10050089	710855004

A further 18 codes were requested by ICN for addition to the table and which were found to have a match already existing in SCT. The following members have therefore also been added to the equivalency table::

ICNP Code	SCT Code
10050138	268360001
10050164	167217005
10050206	269911007
10046788	103699006
10050101	385816003

10050247	103735009
10050140	427247008
10050172	167592004
10050252	85614001
10050309	225981007
10050268	313332003
10050091	225388007
10050299	386226007
10046790	225385005
10050275	704444008
10046800	370813004
10050186	444714004
10050089	710855004

6 Obtaining the equivalency table

The equivalency table was released in April 2016 as a full release and is subsequently being maintained according to the release schedules of ICNP and SNOMED CT.
Access within IHTSDO member countries is provided by the Member National Release Centre in each country, via the relevant Member web page. Affiliates of IHTSDO in non-member countries can access the table in IHTSDO Release Format 2 (RF2) through their MLDS (Member Licensing & Distribution Service) account https://mlds.ihtsdotools.org. Please contact info@ihtsdo.org for more information if required.

The equivalency table is available for download in human readable format from the ICNP website:
http://www.icn.ch/what-we-do/icnp-download/

Users of the table should comply with licensing arrangements for both ICN and SNOMED International.

7 Feedback

ICN and IHTSDO are keen to receive feedback on this product – from both a clinical content perspective and from an implementer's perspective. Feedback should be sent jointly to info@ihtsdo.org and aamherdt@uwm.edu. Feedback should include any issues relating to implementation, suggestions for future content inclusion or general comments regarding the equivalence table.

8 Technical Notes

RF2 package format

The RF2 package convention dictates that it contains all relevant files, regardless of whether or not there is content to be included in each particular release. Therefore, the package contains a mixture of files which contain both header rows and content data, and also files that are intentionally left blank (including only a header record). The reason that these files are not removed from the package is to draw a clear distinction between:

1. ...files that have been deprecated (and therefore removed from the package completely), due to the content no longer being relevant to RF2 in this or future releases, and

2. ...files that just happen to contain no data in this particular release (and are therefore included in the package but left blank, with only a header record), but are still relevant to RF2, and could therefore potentially contain data in future releases.

This allows users to easily distinguish between files that have purposefully been removed or not, as otherwise if files in option 2 above were left out of the package it could be interpreted as an error, rather than an intentional lack of content in that release.

Approvals

Final Version	Date	Approver	Comments
1.0	10 Oct 2017	Jane Millar	Approved
1.0		Lesley MacNeil (or Monica Harry)	

Draft Amendment History

Version	Date	Editor	Comments
0.1	01 Oct 2017	Andrew Atkinson	initial version
1.0	10 Oct 2017	Jane Millar	Final updates

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